

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which (check only one item below):

is attached hereto.  
 was filed as United States application

Serial No \_\_\_\_\_

on \_\_\_\_\_

and was amended

on \_\_\_\_\_

was filed as PCT international application

Number PCT/IB2004/050938

on 21 June 2004

and was amended under PCT Article 19

on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03101856.7	24 June 2003	YES

Combined Declaration For Patent Application and Power of Attorney (Continued)  
(includes Reference to PCT International Applications)

Attorneys Docket Number  
**PHNL030718 US**

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902  
Michael E. Marion, Reg. No. 32, 266  
Edward M. Blocker, Reg. No. 30,245

Direct Telephone Calls to:  
(name and telephone number)  
(914)332-0222

201	FULL NAME OF INVENTOR	FAMILY NAME <b>KLEIHORST</b>	FIRST GIVEN NAME <b>Robert</b>	SECOND GIVEN NAME <b>Paul</b>
	RESIDENCE & CITIZENSHIP	CITY <b>Eindhoven</b>	STATE OR FOREIGN COUNTRY <b>The Netherlands</b>	COUNTRY OF CITIZENSHIP <b>The Netherlands</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>Prof. Holstlaan 6</b>	CITY <b>5656 AA Eindhoven</b>	STATE & ZIP CODE/COUNTRY <b>The Netherlands</b>
202	FULL NAME OF INVENTOR	FAMILY NAME <b>WARNTJES</b>	FIRST GIVEN NAME <b>Jan</b>	SECOND GIVEN NAME <b>Bertus Marten</b>
	RESIDENCE & CITIZENSHIP	CITY <b>Eindhoven</b>	STATE OR FOREIGN COUNTRY <b>The Netherlands</b>	COUNTRY OF CITIZENSHIP <b>The Netherlands</b>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>Prof. Holstlaan 6</b>	CITY <b>5656 AA Eindhoven</b>	STATE & ZIP CODE/COUNTRY <b>The Netherlands</b>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201



SIGNATURE OF INVENTOR 202



DATE

13 January 2005

DATE

13 January 2005

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF  
CORRESPONDENCE ADDRESS**  
*Application*

 Address to:  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Application Number	unknown <b>10/560873</b>
Filing Date	herewith
First Named Inventor	Robert P. KLEIHORST
Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	PHNL030718US

Please change the Correspondence Address for the above-identified patent application to:

 The address associated with  
Customer Number:
**38107***OR*
 Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor
- Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or agent of record. Registration Number 48,979
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Signature

*Tom Lund*Typed or Printed  
Name Thomas M. Lundin

Date December 14, 2005

Telephone 440-483-4281

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.